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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

10

Application Number

10/782,953

Filing Date

February 23, 2004

First Named Inventor

Erik J. Shaholian et al.

Art Unit

2629

Examiner Name

Lao, Lun Yi

Attorney Docket Number

IMMR-0097B (034701-014)

### ENCLOSURES (check all that apply)

☐ Fee Transmittal Form

☐ Fee Attached

☐ Amendment / Reply

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Reply to Missing Parts/  
Incomplete Application

☐ Reply to Missing Parts  
under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a  
Provisional Application

☐ Power of Attorney, Revocation  
Change of Correspondence Address

☐ Terminal Disclaimer

☒ Request for Refund

☐ CD, Number of CD(s) \_\_\_\_\_

☐ Landscape Table on CD

☐ After Allowance Communication to TC

☐ Appeal Communication to Board  
of Appeals and Interferences

☐ Appeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s)  
(please identify below):

Copies of Deposit Account Statements -  
Exhibits A & B; copies of Office Actions  
and postcards showing receipt - Exhibits  
C-F; Return Postcard

Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

THELEN REID BROWN RAYSMAN & STEINER LLP

Signature

Printed Name

Khaled Shaml

Date

April 25, 2008

Reg. No.

38,745

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

Typed or printed name

Sharon E. Byam

Date

April 25, 2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IMMR-0097B (034701-014)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Erik J. Shahoian et al.  
SERIAL NO.: 10/782,953 CONFIRMATION NO.: 7553  
FILING DATE: February 23, 2004  
TITLE: HAPTIC INTERFACE DEVICE AND ACTUATOR ASSEMBLY  
PROVIDING LINEAR HAPTIC SENSATIONS  
EXAMINER: Lao, Lun Yi  
ART UNIT: 2629

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop 16, Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450, on the date printed below:

Date: 4/25/08

Name: Sharon E. Byam  
Sharon E. Byam

MAIL STOP: 16  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

REQUEST FOR REFUND OF FEES

Dear Sir:

Applicant respectfully requests that the United States Patent and Trademark office issue a refund in the amount of \$510.00, to: THELEN REID BROWN RAYSMAN & STEINER LLP, Deposit Account No. 50-1698 which we believe was charged in error by the United States Patent and Trademark Office as follows: \$450.00 on February 15, 2007, for Code 1252, representing charges for a two month extension of time and \$60.00 on January 14, 2008, Code 2252, representing a one month extension of time. Copies of the two Deposit Account Statements reflecting those charges are enclosed as Exhibits A and B, respectively.

It is respectfully submitted that on February 1, 2007, a Response was filed to an Office Action dated November 2, 2006; therefore the Response was timely filed and no extension of time would have been due on February 15, 2007. Therefore, the \$450.00 should be refunded to our deposit account. A copy of the first page of the Office Action (Exhibit C) as well as a copy of the post card showing receipt of the response by the U.S. Patent Office (Exhibit D) is enclosed for your convenience.

Further, on December 13, 2007, a Notice of Appeal was timely filed in response to an Office Action dated September 13, 2007 and therefore, no extension fees would be due for filing this document. The \$60.00 extension fee should also be refunded back into the deposit account. A copy of the first page of this Office Action (Exhibit E) as well as a copy of the post card showing receipt of the Notice of Appeal (Exhibit F) by the U.S. Patent Office is enclosed for your convenience.

Applicant, hereby requests that \$510.00, (\$450.00 plus \$60.00) which were charged in error, be refunded to our Deposit Account No. 50-1698 as soon as possible. Please call the undersigned at the number below if you have any questions regarding this matter.

Respectfully submitted,

THELEN REID BROWN RAYSMAN & STEINER LLP

Dated: 4/25/08



Khaled Shami  
Reg. No. 38,745

THELEN REID BROWN  
RAYSMAN & STEINER LLP  
P.O. Box 640640  
San Jose, CA 95164-0640  
Telephone: (408) 292-5800  
Facsimile: (408) 287-8040



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Page**Deposit Account Statement**

**Requested Statement Month:** February 2007  
**Deposit Account Number:** 501698  
**Name:** THELEN REID BROWN RAYSMAN & STEINER LLP.  
**Attention:** CATHY ELCHINOFF  
**Street Address 1:** 225 W. SANTA CLARA STREET  
**Street Address 2:** 12TH FLOOR  
**City:** SAN JOSE  
**State:** CA  
**Zip:** 95113-1723  
**Country:** UNITED STATES

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
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02/05	3	10165573	CISCO-6157	1201	\$200.00	\$36,855.00
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 BALANCE CHARGES  
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EXHIBIT "A"



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Page**Deposit Account Statement**

**Requested Statement Month:** January 2008  
**Deposit Account Number:** 501698  
**Name:** THELEN REID BROWN RAYSMAN & STEINER LLP.  
**Attention:** CATHY ELCHINOFF  
**Street Address 1:** 225 W. SANTA CLARA STREET  
**Street Address 2:** 12TH FLOOR  
**City:** SAN JOSE  
**State:** CA  
**Zip:** 95113-1723  
**Country:** UNITED STATES

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
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EXHIBIT "B"

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EXHIBIT "B"

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01/16 219	12008916	IMMR-0099P	1011	\$310.00	\$49.51
01/16 220	12008916	IMMR-0099P	1111	\$510.00	\$49.0C

EXHIBIT "B"



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34701-14

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/782,953	02/23/2004	Erik J. Shahoian	IMMR-0097B	7553

60140 7590 11/02/2006

IMMERSION - THELEN REID & PRIEST L.L.P.  
THELEN REID & PRIEST L.L.P.  
P.O. BOX 640640  
SAN JOSE, CA 95164-0640

EXAMINER

LAO, LUN YI

ART UNIT

PAPER NUMBER

2629

DATE MAILED: 11/02/2006

OA Due 2/2/07  
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Date \_\_\_\_\_

EXHIBIT "C"



REVIEWED BY DOCKET

Serial/Patent No.: 10/782,953

Filing/Issue Date: 02/23/2004

Applicant: Erik J. Shahoian

Title: HAPTIC INTERFACE DEVICE AND ACTUATOR ASSEMBLY PROVIDING LINEAR HAPTIC SENSATIONS

Docket No.: IMMR-0097B

Atty/Secy Initials: DBR/KS/ja

Date Mailed: 02/01/2007

Docket Due Date: 02/02/2007

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

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| <input checked="" type="checkbox"/> Amendment/Response (3 pgs.)                  | <input type="checkbox"/> IDS & PTO 1449 (____ pgs.)                          |
| <input type="checkbox"/> Appeal Brief (____ pgs.)                                | <input type="checkbox"/> ____ Pieces of Prior Art Enclosed                   |
| <input type="checkbox"/> Application - Utility (____ pgs. with cover & abstract) | <input type="checkbox"/> Issue Fee Transmittal                               |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)     | <input type="checkbox"/> Submission of Formal Drawings:                      |
| <input type="checkbox"/> Application - Rule 1.53(b) Division (____ pgs.)         | ____ # of sheets includes ____ figures                                       |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.)              | <input type="checkbox"/> Notice of Appeal                                    |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA (____ pgs.)              | <input checked="" type="checkbox"/> Postcard                                 |
| <input type="checkbox"/> Application - PCT (____ pgs.)                           | <input type="checkbox"/> Preliminary Amendment (____ pgs.)                   |
| <input type="checkbox"/> Application - Provisional (____ pgs.)                   | <input type="checkbox"/> Reply Brief (____ pgs.)                             |
| <input type="checkbox"/> Assignment and Cover Sheet                              | <input type="checkbox"/> Req. and Cert. Not to Publish - Rule 1.213          |
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| <input checked="" type="checkbox"/> Certificate of Mailing                       | <input type="checkbox"/> Request for Extension of Time ____ Month(s)         |
| <input type="checkbox"/> Declaration & POA (____ pgs.)                           | <input type="checkbox"/> Response to Notice to File Missing Parts            |
| <input type="checkbox"/> Fee Transmittal   | <input type="checkbox"/> Copy of PTO Notice to File Missing Parts            |
| <input type="checkbox"/> Drawings (informal):                                    | <input checked="" type="checkbox"/> Transmittal Letter                       |
| ____ # of sheets includes ____ figures   | <input type="checkbox"/> Express Mail No.: ____                              |
| <input type="checkbox"/> Other:  | <input type="checkbox"/> Credit Card Transmittal for \$ ____                 |
|  | <input type="checkbox"/> Deposit Acct. No. 50-1698 \$ ____                   |
|  | Patent Code: ____  |
|  | Client/Matter # 034701-014   |



EXHIBIT "D"



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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/782,953	02/23/2004	Erik J. Shaboian	IMMR-0097B	7553

60140 7590 09/13/2007  
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**SEP 17 2007**

TRBRS LLP  
Patent Docket

EXAMINER

LAO, LUN YI

ART UNIT PAPER NUMBER

2629

MAIL DATE DELIVERY MODE

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PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

ACTION DUE: Final OA/Ntc Appeal Due  
DUE/RMR DATE: 11/13/07  
DEADLINE DATE: 3/13/08  
DOCKETED BY: (TM)

EXHIBIT "E"

**REVIEWED BY DOCKET**

Serial/Patent No.: <u>10/782,953</u>		Filing/Issue Date: <u>02/23/2004</u>
Applicant: <u>Erik J. Shahoian</u>		
Title: <u>HAPTIC INTERFACE DEVICE AND ACTUATOR ASSEMBLY PROVIDING LINEAR HAPTIC SENSATIONS</u>		
Docket No.: <u>IMMR-0097B</u>		Atty/Secty Initials: <u>DBR/KS/ja</u>
Date Mailed: <u>12/13/2007</u>		Docket Due Date: <u>12/13/2007</u>

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

<input type="checkbox"/> Amendment/Response (____ pgs.) <input type="checkbox"/> Appeal Brief (____ pgs.) <input type="checkbox"/> Application - Utility (____ pgs. with cover & abstract) <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.) <input type="checkbox"/> Application - Rule 1.53(b) Division (____ pgs.) <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) <input type="checkbox"/> Application - Rule 1.53(d) CPA (____ pgs.) <input type="checkbox"/> Application - PCT (____ pgs.) <input type="checkbox"/> Application - Provisional (____ pgs.) <input type="checkbox"/> Assignment and Cover Sheet <input type="checkbox"/> Certificate of Correction <input checked="" type="checkbox"/> Certificate of Mailing <input type="checkbox"/> Declaration & POA (____ pgs.) <input type="checkbox"/> Fee Transmittal <input type="checkbox"/> Drawings (informal): ____ # of sheets includes ____ figures <input type="checkbox"/> Other: _____	<input type="checkbox"/> IDS & PTO 1449 (____ pgs.) <input type="checkbox"/> ____ Pieces of Prior Art Enclosed <input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Submission of Formal Drawings: ____ # of sheets includes ____ figures <input checked="" type="checkbox"/> Notice of Appeal <input checked="" type="checkbox"/> Postcard <input type="checkbox"/> Preliminary Amendment (____ pgs.) <input type="checkbox"/> Reply Brief (____ pgs.) <input type="checkbox"/> Req. and Cert. Not to Publish - Rule 1.213 <input type="checkbox"/> Request for Continued Examination (RCE) (____ pgs.) <input type="checkbox"/> Request for Extension of Time ____ Month(s) <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Copy of PTO Notice to File Missing Parts <input type="checkbox"/> Transmittal Letter <input type="checkbox"/> Express Mail No.: ____ <input type="checkbox"/> Credit Card Transmittal for \$ ____ <input checked="" type="checkbox"/> Deposit Acct. No. 50-1698 \$510.00 Patent Code: <u>730/1401</u> Client/Matter # <u>034701-014</u>
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**EXHIBIT "F"**

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